

**Fill in this information to identify the case:**Debtor name RI-VAL-RE GENETICS, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGANCase number (if known) 21-00961☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule* \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on April 26, 2021**X /s/ Jerry Irving Jorgensen**

Signature of individual signing on behalf of debtor

**Jerry Irving Jorgensen**

Printed name

**Sole Member**

Position or relationship to debtor

**Fill in this information to identify the case:**Debtor name RI-VAL-RE GENETICS, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGANCase number (if known) 21-00961☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ 0.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ 0.00**1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ 0.00**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 1,589,636.41**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 11,102.37**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 998,449.72**4. Total liabilities** .....  
Lines 2 + 3a + 3b\$ 2,599,188.50

**Fill in this information to identify the case:**Debtor name RI-VAL-RE GENETICS, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGANCase number (if known) 21-00961☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

**Dart Bank - overdrawn as of 12/2020**  
 3.1. **(-\$116.19)**

**Checking****4640****\$0.00****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$0.00****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.  
☐ Yes Fill in the information below.

**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

Debtor RI-VAL-RE GENETICS, LLC  
NameCase number (If known) 21-00961**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.
- ☐ Yes Fill in the information below.

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
- ☐ Yes Fill in the information below.

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
- ☐ Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.
- ☐ Yes Fill in the information below.

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
- ☒ Yes Fill in the information below.

Current value of  
debtor's interest71. **Notes receivable**  
Description (include name of obligor)72. **Tax refunds and unused net operating losses (NOLs)**  
Description (for example, federal, state, local)**Possible unused net operating losses**Tax year **2020****Unknown**

Debtor RI-VAL-RE GENETICS, LLC  
Name

Case number (If known) 21-00961

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$0.00**

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor RI-VAL-RE GENETICS, LLC  
NameCase number (If known) 21-00961**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<u>+</u> <u>\$0.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$0.00</u>	<u>+</u> 91b. <u>\$0.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$0.00</u>

**Fill in this information to identify the case:**Debtor name **RI-VAL-RE GENETICS, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**Case number (if known) **21-00961**☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
<b>2.1</b>	<b>Genstart, LLC</b> Creditor's Name <b>c/o Neil &amp; Joan McDonah</b> <b>W21205 South Street</b> <b>Trempealeau, WI 54661</b> Creditor's mailing address  Creditor's email address, if known  <b>Date debt was incurred</b> <b>5/8/2020 Judgment</b> <b>recorded Ingham County</b> <b>2/5/21</b> <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>Debtor does not own any real property</b>  Describe the lien <b>Judgment Lien, balance after MMPA garnishments</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$44,854.77</b>	<b>\$0.00</b>

<b>2.2</b>	<b>IRUKA CAPITAL GROUP LLC</b> Creditor's Name <b>162 Elmora Avenue</b> <b>Ste. 211</b> <b>Elizabeth, NJ 07202</b> Creditor's mailing address  Creditor's email address, if known  <b>Date debt was incurred</b> <b>7/13/2020 Merchant A/R Agreement w Guaranty</b>	Describe debtor's property that is subject to a lien <b>Ri-Val-Re Genetics, LLC's accounts receivables</b>  Describe the lien <b>Agreement, UCC-1 1/29/20 Accounts Receivables, Cash, etc.</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	<b>\$67,369.82</b>	<b>\$0.00</b>
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Debtor **RI-VAL-RE GENETICS, LLC**

Name

Case number (if known) **21-00961**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.3 JOHN DEERE FINANCIAL**

Creditor's Name

**Recovery Department  
6400 NW 86th Street  
PO Box 6600  
Johnston, IA 50131**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**to be sold 2/15/21**Last 4 digits of account number  
**4711**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**John Deere 333G Compact Track Loader S/N ending in 346933****Unknown****\$0.00**

Describe the lien

**Agreement,UCC-1 2/13/19**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.4 The Dart Bank**

Creditor's Name

**Kassie Rhoades  
368 South Park Street  
P.O. Box 40  
Mason, MI 48854**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**3/21/17, 1/5/18, 11/2/18  
(2),1/29/20 -Guarantor of 5  
PNotes  
Last 4 digits of account number**

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Agricultural Security Agreements All Farm assets: machinery, equipment, crops. livestock, supplies; balance as of 3/22/21 includes attorneys fees, interest, late charges****\$1,477,411.82****\$0.00**

Describe the lien

**Agreement,UCC-1s 3/31/16**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.5 Viking Funding Group, LLC**

Describe debtor's property that is subject to a lien

**\$0.00****\$0.00**



Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961**

Name

Creditor's Name

**102 Jericho Turnpike  
Suite 103  
Floral Park, NY 11001**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**3/7/2019 Merchant  
Agreement**

Last 4 digits of account number

Do multiple creditors have an  
interest in the same property?☒ No☐ Yes. Specify each creditor,  
including this creditor and its relative  
priority.**Satisfied, no UCC Termination Statement of  
record**

Describe the lien

**UCC-1 03/15/2019 future receivables**

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$1,589,636.4  
1****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did  
you enter the related creditor?Last 4 digits of  
account number for  
this entity**30th Judicial Circuit Court  
Veterans Memorial Courthouse  
P.O. Box 40771  
Lansing, MI 48901-7971**Line 2.4**BC30****Clerk of the Court  
Ingham County Circuit Court  
313 W. Kalamazoo Street  
Lansing, MI 48933**Line 2.4**BC30****Corporation Service Co as rep  
PO Box 2576  
Springfield, IL 62708**Line 2.5**5343****Deere & Company  
6400 NW 86th St  
PO Box 6630  
Johnston, IA 50131**Line 2.3**4711****Howard I. Wallach  
Foley & Mansfield  
130 East 9 Mile Road  
Ferndale, MI 48220**Line 2.1**63CK****Isaac H. Greenfield, Esq.  
6 Stone Street  
3rd Floor  
New York, NY 10004**Line 2.2**Iruka Capital  
Group LLC**

Debtor **RI-VAL-RE GENETICS, LLC**

Name

Case number (if known)

**21-00961**

**Lendr**  
**515 N State Street**  
**Suite 950**  
**Chicago, IL 60654**

Line **2.5**

**Lisa A. Hall, Esq.**  
**PLUNKETT COONEY**  
**333 Bridge Street, NW**  
**Suite 530**  
**Grand Rapids, MI 49504**

Line **2.4****DART BANK**

**The Dart Bank**  
**1020 Charlevoix**  
**Grand Ledge, MI 48837**

Line **2.4****RI-VAL-RE  
GENETICS LLC**

**Fill in this information to identify the case:**Debtor name **RI-VAL-RE GENETICS, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF MICHIGAN**Case number (if known) **21-00961**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2.1	Priority creditor's name and mailing address <b>Business Tax Section</b> <b>MI Department of Treasury</b> <b>PO Box 30427</b> <b>Lansing, MI 48909</b>  Date or dates debt was incurred  <b>2020</b>  Last 4 digits of account number <b>6777</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>RI-VAL-RE GENETICS LLC MI SUW Taxes:</b> <b>3/2020 \$1080.74; 4/2020 \$973.48; 5/2020 \$316.66;</b> <b>6/2020 \$917.18; 7/2020 \$537.70; 8/2020 \$328.39;</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,154.15</b>	<b>\$4,154.15</b>
2.2	Priority creditor's name and mailing address <b>Internal Revenue Service</b> <b>Insolvency Unit</b> <b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b>  Date or dates debt was incurred  <b>2020</b>  Last 4 digits of account number <b>6777</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>941 tax liabilities \$3305.63 check dishonored</b> <b>3/20/20, \$66.11 penalty as of 04/2020</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,371.74</b>	<b>\$3,371.74</b>

Debtor	<b>RI-VAL-RE GENETICS, LLC</b>	Case number (if known)	<b>21-00961</b>
	Name		

  

2.3	Priority creditor's name and mailing address <b>STATE OF MI - UNEMPLOYMENT INS</b> <b>ATTN BANKRUPTCY UNIT</b> <b>3024 W GRAND BLVD</b> <b>SUITE 12-100</b> <b>Detroit, MI 48202-6024</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,576.48</b> <b>\$3,576.48</b>
	Date or dates debt was incurred  <b>06/30/20, 09/30/20</b>	Basis for the claim: <b>as of 3/18/21 for Ri-Val-Re Genetics LLC</b> <b>quarterly tax payments + interest &amp; penalty</b> <b>(\$722 principal)</b>	
	Last 4 digits of account number <b>8000</b>  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
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3.1	Nonpriority creditor's name and mailing address <b>Aaron Jorgensen</b> <b>4104 Moyer Road</b> <b>Williamston, MI 48895</b>  Date(s) debt was incurred <u>2018-2021</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Loans for business operations: 7/9/19 \$40000</u> <u>RI-VAL-RE, 8/12/19 \$25000 (payable to Jerry deposited into</u> <u>RI-VAL-RE), possible other assistance</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$65,000.00</b>
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3.2	Nonpriority creditor's name and mailing address <b>Amex</b> <b>Correspondence/Bankruptcy</b> <b>Po Box 981540</b> <b>El Paso, TX 79998</b>  Date(s) debt was incurred <u>Opened 03/18 Last</u> <u>Active 09/20</u> Last 4 digits of account number <u>8783</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Delta Sky Miles Reserve Business Card ending in</u> <u>6-81001 used for business Ri-Val-Re Genetics LLC</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$23,383.00</b>
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3.3	Nonpriority creditor's name and mailing address <b>Amex</b> <b>Correspondence/Bankruptcy</b> <b>Po Box 981540</b> <b>El Paso, TX 79998</b>  Date(s) debt was incurred <u>Opened 03/18 Last</u> <u>Active 07/19</u> Last 4 digits of account number <u>8453</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Credit Card - possible duplicate uncertain if Debtor is</u> <u>an obligor \$8234.00</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1.00</b>
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3.4	Nonpriority creditor's name and mailing address <b>Amex</b> <b>Correspondence/Bankruptcy</b> <b>Po Box 981540</b> <b>El Paso, TX 79998</b>  Date(s) debt was incurred <u>Opened 03/18 Last</u> <u>Active 09/20</u> Last 4 digits of account number <u>2613</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Delta Sky Miles Platinum Business Card ending in</u> <u>8-11002 used for business Ri Val Re Genetics LLC</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,776.00</b>
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Debtor <b>RI-VAL-RE GENETICS, LLC</b>		Case number (if known) <b>21-00961</b>
Name _____		

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3.5	Nonpriority creditor's name and mailing address <b>Andrew Beckel &amp; Dagmar Beckel</b> <b>Golden Calf Company LLC</b> <b>21677 27th Street</b> <b>Bloomer, WI 54724</b> Date(s) debt was incurred <u>6/13/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$2,350.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Chippewa County Circuit Court, WI Small Claims Amended Judgment # 20 SC 552 Calf Care packages for Ri-Val-Re Genetics LLC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.6	Nonpriority creditor's name and mailing address <b>Animart. LLC</b> <b>Kim Martel</b> <b>1240 Green Valley Rd</b> <b>Beaver Dam, WI 53916</b> Date(s) debt was incurred <u>6/25/19 Charge Account Agreement</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$11,448.38</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Dodge County WI Amended Judgment against Debtor and Jerry Jorgensen - believe Armor Animal Health creditor below successor in interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	Nonpriority creditor's name and mailing address <b>Armor Animal Health</b> <b>BIN 88572</b> <b>Milwaukee, WI 53288-0572</b> Date(s) debt was incurred <u>2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$8,966.53</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>billed to Ri-Val-Re Farms + interest charges - possible duplicate as believe part of Animart, LLC Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.8	Nonpriority creditor's name and mailing address <b>Beck Embryo Transfer, LLC</b> <b>Tara Brent &amp; Brent Beck</b> <b>S435 Nilsestuen Rd</b> <b>Cashton, WI 54619</b> Date(s) debt was incurred <u>01/2017 - 04/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$1.00</b> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>1/7/21 Affidavit &amp; Notice of Entry of 12/15/20 \$24,889.72 Foreign Judgment against Sole Member: Trempealeau County Cir Ct #2020-CV-147 IVF, embryo collection &amp; embryo implantation services &amp; medicines for cattle</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.9	Nonpriority creditor's name and mailing address <b>Caledonia Farmers Elevator</b> <b>146 E Main Street SE</b> <b>Caledonia, MI 49316</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$131,680.83</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>12/19/2019 Default Judgment against Ri-Val-Re Genetics, LLC with 2020 Garnishments</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.10	Nonpriority creditor's name and mailing address <b>Capital One</b> <b>Attn: Bankruptcy</b> <b>Po Box 30285</b> <b>Salt Lake City, UT 84130</b> Date(s) debt was incurred <u>Opened 05/18 Last Active 04/20</u> Last 4 digits of account number <u>4129</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$1.00</b> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Charge Account reflected on Sole Member's Credit Report as a joint contractual liability, uncertain if Debtor also an obligor \$11583.00</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor Name	Case number (if known)	
<b>RI-VAL-RE GENETICS, LLC</b>	<b>21-00961</b>	
<b>3.11</b> Nonpriority creditor's name and mailing address <b>CentralStar Cooperative</b> <b>PO Box 23157</b> <b>Lansing, MI 48909</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>1035</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,585.29</b>
<b>3.12</b> Nonpriority creditor's name and mailing address <b>Chase Card Services</b> <b>Attn: Bankruptcy</b> <b>Po Box 15298</b> <b>Wilmington, DE 19850</b> Date(s) debt was incurred <u>Opened 03/18 Last Active 03/20</u> Last 4 digits of account number <u>6492</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Credit Card reflected on Sole Member's Credit Report as a joint contractual liability, uncertain if Debtor also an obligor</u> <b>\$40452.00</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1.00</b>
<b>3.13</b> Nonpriority creditor's name and mailing address <b>Citi</b> <b>Box 6077</b> <b>Sioux Falls, SD 57117-6077</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>4924</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>"RIVALRE" Genetics LLC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,438.62</b>
<b>3.14</b> Nonpriority creditor's name and mailing address <b>Citibank</b> <b>Centralized Bk dept</b> <b>Po Box 790034</b> <b>St Louis, MO 63179</b> Date(s) debt was incurred <u>Opened 06/02 Last Active 3/07/21</u> Last 4 digits of account number <u>1635</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Credit Card reflected on Sole Member's Credit Report as a joint contractual liability, uncertain if Debtor also an obligor</u> <b>\$331.00</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1.00</b>
<b>3.15</b> Nonpriority creditor's name and mailing address <b>DeLaval Inc - DDS Main</b> <b>Dept CH 17546</b> <b>Palatine, IL 60055-7546</b> Date(s) debt was incurred <u>07/2020</u> Last 4 digits of account number <u>5375</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$759.04</b>
<b>3.16</b> Nonpriority creditor's name and mailing address <b>Driven Embryo Services, LLC</b> <b>Justin Helgerson</b> <b>1277 Highway 9</b> <b>Decorah, IA 52101</b> Date(s) debt was incurred <u>2019</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Ri-Val-Re Genetics litigation in Winneshiek County Iowa 01961 LACV026673</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$33,610.59</b>

Debtor	RI-VAL-RE GENETICS, LLC	Case number (if known)	21-00961
Name			
3.17	<b>Nonpriority creditor's name and mailing address</b> <b>DTE Energy</b> <b>PO Box 740786</b> <b>Cincinnati, OH 45274-0786</b> Date(s) debt was incurred <u>2020</u> Last 4 digits of account number <u>9864</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>1/27/21 SHUTOFF @ 4765 Moyer Rd Webberville MI farm buildings \$26,131.69 billed to Jerry Jorgensen</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1.00</b>
3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Farm Credit Svcs of America</b> <b>AgDirect</b> <b>P.O. Box 2409</b> <b>Omaha, NE 68103</b> Date(s) debt was incurred <u>UCC-1 4/16/2019</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>John Deere 4850 Tractor RW4850P003115 sold at 12/15/20 Auction for \$23276.92 (net) Deficiency Unknown</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Farm Credit/agdirect</b> <b>Po Box 2409</b> <b>Omaha, NE 68103</b> Date(s) debt was incurred <u>Opened 1/02/19 Last Active 03/21</u> Last 4 digits of account number <u>1846</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Mensch M910 Scraper: Pull-Type 37963 Kuhn RI-VAL-RE GENETICS LLC'S Knight VT168T Feed Wagon/Mixer C0109 deficiency balance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$14,857.00</b>
3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Fowlerville Veterinary Clinic</b> <b>6440 Grand River</b> <b>PO Box 383</b> <b>Fowlerville, MI 48836</b> Date(s) debt was incurred <u>2020 services</u> Last 4 digits of account number <u>L115</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>billed to Ri-Val-Re Genetics LLC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,212.66</b>
3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Genetic Visions ST, LLC</b> <b>8137 Forsythia St.</b> <b>Ste. 100</b> <b>Middleton, WI 53562</b> Date(s) debt was incurred <u>2019 - 2020</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>billed to Sole Member uncertain if Debtor also an obligor \$46,906.00</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1.00</b>
3.22	<b>Nonpriority creditor's name and mailing address</b> <b>Great Lakes Sire Service, Inc.</b> <b>723 Himebaugh Rd.</b> <b>Bronson, MI 49028</b> Date(s) debt was incurred <u>2020 various</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>billed to Ri-Val-Re Genetics LLC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,997.94</b>



Debtor	RI-VAL-RE GENETICS, LLC	Case number (if known)	21-00961
3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Holstein Association USA, Inc.</b> <b>Jody Hamilton Manager</b> <b>1 Holstein Place</b> <b>PO Box 808</b> <b>Brattleboro, VT 05302-0808</b> Date(s) debt was incurred <u>2020</u> Last 4 digits of account number <u>1570</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>bileed to Jerry Jorgensen \$3510.18</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1.00</b>
3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Hoofstock Genetics</b> <b>4584 FM RD 570</b> <b>Ranger, TX 76470</b> Date(s) debt was incurred <u>2018-2020</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>embryo frozen storage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,281.12</b>
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>Ingham County Farm Srv Agency</b> <b>US Dept of Agriculture</b> <b>521 N Okemos St</b> <b>Mason, MI 48854-1224</b> Date(s) debt was incurred <u>2020</u> Last 4 digits of account number <u>1397</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Ri-Val-Re Genetics LLC Dairy Margin Coverage Prem Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,868.62</b>
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>Ingham County Farm Srv Agency</b> <b>US Dept of Agriculture</b> <b>521 N Okemos St</b> <b>Mason, MI 48854-1224</b> Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>1785</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Agricultural Risk Coverage Prem - County + Price Loss Coverage Program</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,827.00</b>
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>Ingham County Farm Srv Agency</b> <b>US Dept of Agriculture</b> <b>521 N Okemos St</b> <b>Mason, MI 48854-1224</b> Date(s) debt was incurred <u>2020</u> Last 4 digits of account number <u>2064</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Ri-Val-Re Genetics LLC Dairy Margin Coverage Prem Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,250.00</b>
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Jerry &amp; Dorothy Jorgensen</b> <b>4211 Morrice Road</b> <b>Webberville, MI 48892</b> Date(s) debt was incurred <u>7/25/19 &amp; 9/12/2019</u> Last 4 digits of account number <u>    </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Loans, no repayment: 2 @\$13335 on 7/25/19 and \$225000 on 9/12/19 [payable to Jerry, deposited into RI-VAL-RE for business]</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$251,670.00</b>
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>JOHN DEERE FINANCIAL</b> <b>6400 NW 86th Street</b> <b>PO Box 6600</b> <b>Johnston, IA 50131-6600</b> Date(s) debt was incurred <u>2020 deficiency</u> Last 4 digits of account number <u>4766</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>AND possible deficiency on #510001634711 Loader</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$14,517.32</b>



Debtor **RI-VAL-RE GENETICS, LLC**  
NameCase number (if known) **21-00961**

3.30 Nonpriority creditor's name and mailing address  
**Kreeger & Associates, LLC**  
**P.O. Box 42**  
**Cass City, MI 48726**  
 Date(s) debt was incurred 2020  
 Last 4 digits of account number           

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: **FOR NOTICE ONLY - Sale of dairy cows for Ri-Val-Re Genetics, LLC liquidation**  
 Is the claim subject to offset? ☒ No ☐ Yes

3.31 Nonpriority creditor's name and mailing address  
**Larson Acres, Inc.**  
**Michael Larson, President**  
**18218 W. State Road 59**  
**Evansville, WI 53536**  
 Date(s) debt was incurred 7/31/2018 purchase of Heifers  
 Last 4 digits of account number           

As of the petition filing date, the claim is: *Check all that apply.* **\$24,585.00**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: 8/14/20 Affidavit & Notice of Entry of Foreign Judgment - Rock County, Wisconsin #2020CV217  
 Is the claim subject to offset? ☒ No ☐ Yes

3.32 Nonpriority creditor's name and mailing address  
**Michigan Livestock Srvce, Inc**  
**PO Box 661**  
**Ovid, MI 48866-0661**  
 Date(s) debt was incurred prior to 02/2020  
 Last 4 digits of account number           

As of the petition filing date, the claim is: *Check all that apply.* **\$1,773.66**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: Ri-Val-Re Genetics LLC balance includes late fees  
 Is the claim subject to offset? ☒ No ☐ Yes

3.33 Nonpriority creditor's name and mailing address  
**Midland Credit Management**  
**350 Camino De La Reina**  
**Suite 100**  
**San Diego, CA 92108**  
 Date(s) debt was incurred 2019  
 Last 4 digits of account number 2467

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
☒ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: FOR NOTICE ONLY AMEX ending in 82000  
 Is the claim subject to offset? ☒ No ☐ Yes

3.34 Nonpriority creditor's name and mailing address  
**Office of the U.S. Trustee**  
**The Ledyard Bldg 2nd Floor**  
**125 Ottawa Ave., NW, Ste 200R**  
**Grand Rapids, MI 49503**  
 Date(s) debt was incurred FOR NOTICE ONLY  
 Last 4 digits of account number           

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim:             
 Is the claim subject to offset? ☒ No ☐ Yes

3.35 Nonpriority creditor's name and mailing address  
**Randy's Service Station**  
**8030 W Mason Road**  
**Fowlerville, MI 48836**  
 Date(s) debt was incurred 2020  
 Last 4 digits of account number RIVGEN

As of the petition filing date, the claim is: *Check all that apply.* **\$25,783.10**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: Fuel billed to Ri-Val-Re Genetics LLC  
 Is the claim subject to offset? ☒ No ☐ Yes

3.36 Nonpriority creditor's name and mailing address  
**Roberts Dairy Service, Inc.**  
**3700 S US 27**  
**PO Box 128**  
**Saint Johns, MI 48879**  
 Date(s) debt was incurred 2019  
 Last 4 digits of account number           

As of the petition filing date, the claim is: *Check all that apply.* **\$2,733.78**  
☐ Contingent  
☐ Unliquidated  
☐ Disputed  
 Basis for the claim: billed to Ri-Val-Re Genetics LLC  
 Is the claim subject to offset? ☒ No ☐ Yes

Debtor	RI-VAL-RE GENETICS, LLC	Case number (if known)	21-00961
3.37	<p>Nonpriority creditor's name and mailing address</p> <p><b>STgenetics</b>  <b>22575 State Highway 6 South</b>  <b>Navasota, TX</b></p> <p>Date(s) debt was incurred <u>2019</u></p> <p>Last 4 digits of account number <u>3895</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Billed to Jerry Jorgensen \$103.57</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1.00</b>
3.38	<p>Nonpriority creditor's name and mailing address</p> <p><b>Swan Fuel Service, Inc.</b>  <b>1615 Mason St.</b>  <b>Dansville, MI 48819</b></p> <p>Date(s) debt was incurred <u>2020</u></p> <p>Last 4 digits of account number <u>2146</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,108.77</b>
3.39	<p>Nonpriority creditor's name and mailing address</p> <p><b>Synergy Genetics, LLC</b>  <b>1818 Linwood Road</b>  <b>Linwood, NY 14486</b></p> <p>Date(s) debt was incurred <u>prior to 12/31/20 statement</u></p> <p>Last 4 digits of account number <u></u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>billed to Aaron Jorgensen/RI-VAL-RE Holsteins incorrect account RI-VAL-RE Genetics, LLC &amp; Jerry Jorgensen are sole obligors - disputed as to amount</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$129,760.00</b>
3.40	<p>Nonpriority creditor's name and mailing address</p> <p><b>TEK Dairy Supply, Inc.</b>  <b>7260 Owosso Rd.</b>  <b>Fowlerville, MI 48836</b></p> <p>Date(s) debt was incurred <u>prior to 09/2020</u></p> <p>Last 4 digits of account number <u></u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>billed to Ri-Val-Re Genetics LLC, balance includes finance charges</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$13,977.24</b>
3.41	<p>Nonpriority creditor's name and mailing address</p> <p><b>The Dart Bank</b>  <b>Kassie Rhoades</b>  <b>368 South Park Street</b>  <b>P.O. Box 40</b>  <b>Mason, MI 48854</b></p> <p>Date(s) debt was incurred <u>various</u></p> <p>Last 4 digits of account number <u></u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Credit Card</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$20,128.64</b>
3.42	<p>Nonpriority creditor's name and mailing address</p> <p><b>Twin River Veterinary Service</b>  <b>8999 Kessinger Road</b>  <b>Tremont, IL 61568</b></p> <p>Date(s) debt was incurred <u>prior to 2020</u></p> <p>Last 4 digits of account number <u></u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>includes disputed months of past due interest charges</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$49,018.62</b>
3.43	<p>Nonpriority creditor's name and mailing address</p> <p><b>Webberville Feed &amp; Grain Co.</b>  <b>PO Box 680</b>  <b>421 S Summit Street</b>  <b>Webberville, MI 48892</b></p> <p>Date(s) debt was incurred <u>various 2019-2020</u></p> <p>Last 4 digits of account number <u></u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Ri-Val-Re Genetics LLC</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$92,831.69</b>

Debtor **RI-VAL-RE GENETICS, LLC**  
NameCase number (if known) **21-00961**

3.44 Nonpriority creditor's name and mailing address

**Webster & Griffes, Inc.**  
**5287 E Allen Road**  
**Webberville, MI 48892**Date(s) debt was incurred **Fall 2019**

Last 4 digits of account number \_

As of the petition filing date, the claim is: *Check all that apply.***\$3,260.28**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **RI-VAL-RE GENETICS, LLC Invoices cow sand includes monthly finance charges**Is the claim subject to offset? ☒ No ☐ Yes**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Amex</b> <b>P.o. Box 981537</b> <b>El Paso, TX 79998</b>	Line <b>3.2</b> <input type="checkbox"/> Not listed. Explain _____	<b>8783</b>
4.2	<b>Amex</b> <b>P.o. Box 981537</b> <b>El Paso, TX 79998</b>	Line <b>3.3</b> <input type="checkbox"/> Not listed. Explain _____	—
4.3	<b>Amex</b> <b>P.o. Box 981537</b> <b>El Paso, TX 79998</b>	Line <b>3.4</b> <input type="checkbox"/> Not listed. Explain _____	—
4.4	<b>Barrett M Gipp. Esq.</b> <b>212 Winnebago Street</b> <b>PO Box 450</b> <b>Decorah, IA 52101</b>	Line <b>3.16</b> <input type="checkbox"/> Not listed. Explain _____	<b>Driven Embryo</b>
4.5	<b>Brian Petersen</b> <b>AgDirect Resolution Officer</b> <b>Farm Credit Services America</b> <b>PO Box 2409</b> <b>Omaha, NE 68103-2409</b>	Line <b>3.19</b> <input type="checkbox"/> Not listed. Explain _____	—
4.6	<b>Business Tax Section</b> <b>MI Department of Treasury</b> <b>PO Box 30427</b> <b>Lansing, MI 48909</b>	Line <b>2.3</b> <input type="checkbox"/> Not listed. Explain _____	<b>6777</b>
4.7	<b>Capital One</b> <b>Po Box 31293</b> <b>Salt Lake City, UT 84131</b>	Line <b>3.10</b> <input type="checkbox"/> Not listed. Explain _____	—
4.8	<b>Chase Card Services</b> <b>Po Box 15369</b> <b>Wilmington, DE 19850</b>	Line <b>3.12</b> <input type="checkbox"/> Not listed. Explain _____	<b>6492</b>
4.9	<b>Citibank</b> <b>Po Box 6217</b> <b>Sioux Falls, SD 57117</b>	Line <b>3.14</b> <input type="checkbox"/> Not listed. Explain _____	—

Debtor <b>RI-VAL-RE GENETICS, LLC</b>		Case number (if known) <b>21-00961</b>
Name		
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed? Last 4 digits of account number, if any
4.10	<b>Clerk of the Court Dodge County Justice Facility 210 W. Center Street Juneau, WI 53039-1091</b>	Line <u>3.6</u> <u>1460</u> <input type="checkbox"/> Not listed. Explain _____
4.11	<b>Credit Bureau of Ypsilanti Inc PO Box 981274 Ypsilanti, MI 48198</b>	Line <u>3.43</u> <u>7760</u> <input type="checkbox"/> Not listed. Explain _____
4.12	<b>Deanna Swisher Foster Swift Collins &amp; Smith 313 S. Washington Square Lansing, MI 48933-2114</b>	Line <u>3.9</u> <u>Caledonia Farm ers Elevator</u> <input type="checkbox"/> Not listed. Explain _____
4.13	<b>ESP Receivables Management Inc PO Box 1547 Mandeville, LA 70470</b>	Line <u>3.11</u> <u>6121</u> <input type="checkbox"/> Not listed. Explain _____
4.14	<b>Internal Revenue Service 3251 N. Evergreen Drive, NE Insolvency Group 4, Stop 93 Grand Rapids, MI 49525</b>	Line <u>2.2</u> <u>6777</u> <input type="checkbox"/> Not listed. Explain _____
4.15	<b>Internal Revenue Service Dept. of the Treasury Ogden, UT 84201-0035</b>	Line <u>2.2</u> <u>6777</u> <input type="checkbox"/> Not listed. Explain _____
4.16	<b>JOHN DEERE FINANCIAL Multi Use Account 8402 Excelsior Drive PO Box 5328 Madison, WI 53705-0328</b>	Line <u>3.29</u> <u>4766</u> <input type="checkbox"/> Not listed. Explain _____
4.17	<b>JOHN DEERE FINANCIAL 23176 Network Place Chicago, IL 60673-1231</b>	Line <u>3.29</u> <u>4766</u> <input type="checkbox"/> Not listed. Explain _____
4.18	<b>Lisa Kay Lietz-Ray Laffey Sabranek Audy &amp; Ristau 16 N Carroll Street Suite 500 Madison, WI 53703</b>	Line <u>3.6</u> <u>mart,3045</u> <input type="checkbox"/> Not listed. Explain _____
4.19	<b>Matthew T Roethe Roethe Pope Roethe LLP 24 N Henry Street Edgerton, WI 53534</b>	Line <u>3.31</u> <u>Larson Acres</u> <input type="checkbox"/> Not listed. Explain _____
4.20	<b>Michigan Dept of Treasury Bankruptcy - Claims Unit PO Box 30168 Lansing, MI 48909</b>	Line <u>2.1</u> <u>6777</u> <input type="checkbox"/> Not listed. Explain _____
4.21	<b>Nationwide Credit Inc PO BOX 15131 Wilmington, DE 19850-5130</b>	Line <u>3.12</u> <u>1091</u> <input type="checkbox"/> Not listed. Explain _____

Debtor	RI-VAL-RE GENETICS, LLC	Case number (if known)	21-00961
Name		On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.22	<b>Sarah E Korte</b> <b>Moen Sheehan Meyer, Ltd</b> <b>201 Main Street</b> <b>Suite 700</b> <b>La Crosse, WI 54601</b>	Line <u>3.8</u> <input type="checkbox"/> Not listed. Explain _____	<u>Beck Embryo T</u> <u>ransfer</u>
4.23	<b>Stillman Law Office</b> <b>Michael R Stillman</b> <b>30057 Orchard Lake Rd</b> <b>Ste 200</b> <b>Farmington, MI 48334</b>	Line <u>3.21</u> <input type="checkbox"/> Not listed. Explain _____	<u>3920</u>
4.24	<b>Unemployment Insurance Agency</b> <b>Tax Enforcement Unit</b> <b>PObox 8068</b> <b>Royal Oak, MI 48068-8068</b>	Line <u>2.3</u> <input type="checkbox"/> Not listed. Explain _____	—
4.25	<b>US Attorney's Office</b> <b>Western District of Michigan</b> <b>Bankruptcy Section</b> <b>PO Box 208</b> <b>Grand Rapids, MI 49501-0208</b>	Line <u>2.2</u> <input type="checkbox"/> Not listed. Explain _____	<u>6777</u>
4.26	<b>USDA FPAC Business Center</b> <b>PO Box 419205</b> <b>STOP 8212</b> <b>Kansas City, MO 64141-6205</b>	Line <u>3.25</u> <input type="checkbox"/> Not listed. Explain _____	<u>1397</u>
4.27	<b>USDA FPAC Business Center</b> <b>PO Box 419205</b> <b>STOP 8212</b> <b>Kansas City, MO 64141-6205</b>	Line <u>3.26</u> <input type="checkbox"/> Not listed. Explain _____	<u>1397</u>
4.28	<b>USDA FPAC Business Center</b> <b>PO Box 419205</b> <b>STOP 8212</b> <b>Kansas City, MO 64141-6205</b>	Line <u>3.27</u> <input type="checkbox"/> Not listed. Explain _____	<u>1397</u>
4.29	<b>Williams Farm Machinery Inc</b> <b>1115 Lansing Rd</b> <b>Charlotte, MI 48813</b>	Line <u>3.19</u> <input type="checkbox"/> Not listed. Explain _____	—
4.30	<b>Winneshiek County Clerk</b> <b>201 W Main</b> <b>Decorah, IA 52101</b>	Line <u>3.16</u> <input type="checkbox"/> Not listed. Explain _____	<u>6673</u>

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.**

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>11,102.37</u>
5b. +	\$ <u>998,449.72</u>
5c.	\$ <u>1,009,552.09</u>

**Fill in this information to identify the case:**Debtor name RI-VAL-RE GENETICS, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGANCase number (if known) 21-00961☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

**Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Fill in this information to identify the case:**Debtor name RI-VAL-RE GENETICS, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGANCase number (if known) 21-00961☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1 **Andrea Lee Jorgensen**  
**4765 Moyer Road**  
**Webberville, MI 48892**

**The Dart Bank**

☒ D 2.4  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

2.2 **Jerry Irving Jorgensen**  
**4765 Moyer Road**  
**Webberville, MI 48892**

**Aaron Jorgensen**

☐ D \_\_\_\_\_  
☒ E/F 3.1  
☐ G \_\_\_\_\_

2.3 **Jerry Irving Jorgensen**  
**4765 Moyer Road**  
**Webberville, MI 48892**

**Amex**

☐ D \_\_\_\_\_  
☒ E/F 3.2  
☐ G \_\_\_\_\_

2.4 **Jerry Irving Jorgensen**  
**4765 Moyer Road**  
**Webberville, MI 48892**

**Amex**

☐ D \_\_\_\_\_  
☒ E/F 3.3  
☐ G \_\_\_\_\_

2.5 **Jerry Irving Jorgensen**  
**4765 Moyer Road**  
**Webberville, MI 48892**

**Amex**

☐ D \_\_\_\_\_  
☒ E/F 3.4  
☐ G \_\_\_\_\_

Debtor RI-VAL-RE GENETICS, LLCCase number (if known) 21-00961**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Andrew Beckel &amp; Dagmar Beckel</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.5</u> <input type="checkbox"/> G _____
<hr/>				
2.7	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Animart. LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.6</u> <input type="checkbox"/> G _____
<hr/>				
2.8	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Armor Animal Health</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.7</u> <input type="checkbox"/> G _____
<hr/>				
2.9	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Beck Embryo Transfer, LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.8</u> <input type="checkbox"/> G _____
<hr/>				
2.10	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Business Tax Section</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.1</u> <input type="checkbox"/> G _____
<hr/>				
2.11	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Capital One</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.10</u> <input type="checkbox"/> G _____
<hr/>				
2.12	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>CentralStar Cooperative</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
<hr/>				
2.13	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Chase Card Services</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.12</u> <input type="checkbox"/> G _____
<hr/>				



Debtor RI-VAL-RE GENETICS, LLCCase number (if known) 21-00961**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14 Jerry Irving Jorgensen 4765 Moyer Road Webberville, MI 48892 Citi ☐ D \_\_\_\_\_ ☒ E/F 3.13 ☐ G \_\_\_\_\_

2.15 Jerry Irving Jorgensen 4765 Moyer Road Webberville, MI 48892 Citibank ☐ D \_\_\_\_\_ ☒ E/F 3.14 ☐ G \_\_\_\_\_

2.16 Jerry Irving Jorgensen 4765 Moyer Road Webberville, MI 48892 DeLaval Inc - DDS Main ☐ D \_\_\_\_\_ ☒ E/F 3.15 ☐ G \_\_\_\_\_

2.17 Jerry Irving Jorgensen 4765 Moyer Road Webberville, MI 48892 Driven Embryo Services, LLC ☐ D \_\_\_\_\_ ☒ E/F 3.16 ☐ G \_\_\_\_\_

2.18 Jerry Irving Jorgensen 4765 Moyer Road Webberville, MI 48892 DTE Energy ☐ D \_\_\_\_\_ ☒ E/F 3.17 ☐ G \_\_\_\_\_

2.19 Jerry Irving Jorgensen 4765 Moyer Road Webberville, MI 48892 Farm Credit Svcs of America ☐ D \_\_\_\_\_ ☒ E/F 3.18 ☐ G \_\_\_\_\_

2.20 Jerry Irving Jorgensen 4765 Moyer Road Webberville, MI 48892 Farm Credit/agdirect ☐ D \_\_\_\_\_ ☒ E/F 3.19 ☐ G \_\_\_\_\_

2.21 Jerry Irving Jorgensen 4765 Moyer Road Webberville, MI 48892 Fowlerville Veterinary Clinic ☐ D \_\_\_\_\_ ☒ E/F 3.20 ☐ G \_\_\_\_\_

Debtor RI-VAL-RE GENETICS, LLCCase number (if known) 21-00961**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.22	Jerry Irving Jorgensen	4765 Moyer Road Webberville, MI 48892	Genetic Visions ST, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.21</u> <input type="checkbox"/> G _____
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2.23	Jerry Irving Jorgensen	4765 Moyer Road Webberville, MI 48892	Genstart, LLC	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.24	Jerry Irving Jorgensen	4765 Moyer Road Webberville, MI 48892	Great Lakes Sire Service, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.22</u> <input type="checkbox"/> G _____
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2.25	Jerry Irving Jorgensen	4765 Moyer Road Webberville, MI 48892	Holstein Association USA, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.23</u> <input type="checkbox"/> G _____
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2.26	Jerry Irving Jorgensen	4765 Moyer Road Webberville, MI 48892	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.2</u> <input type="checkbox"/> G _____
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2.27	Jerry Irving Jorgensen	4765 Moyer Road Webberville, MI 48892	IRUKA CAPITAL GROUP LLC	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.28	Jerry Irving Jorgensen	4765 Moyer Road Webberville, MI 48892	JOHN DEERE FINANCIAL	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.29	Jerry Irving Jorgensen	4765 Moyer Road Webberville, MI 48892	JOHN DEERE FINANCIAL	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.29</u> <input type="checkbox"/> G _____
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Debtor RI-VAL-RE GENETICS, LLCCase number (if known) 21-00961**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.30	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Kreeger &amp; Associates, LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.30</u> <input type="checkbox"/> G _____
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2.31	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Larson Acres, Inc.</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.31</u> <input type="checkbox"/> G _____
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2.32	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Michigan Livestock Srvice, Inc</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.32</u> <input type="checkbox"/> G _____
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2.33	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Midland Credit Management</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.33</u> <input type="checkbox"/> G _____
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2.34	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>STATE OF MI - UNEMPLOYMENT INS</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.3</u> <input type="checkbox"/> G _____
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2.35	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>STgenetics</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.36	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Synergy Genetics, LLC</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.39</u> <input type="checkbox"/> G _____
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2.37	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>The Dart Bank</b>	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961****Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.38	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Viking Funding Group, LLC</b>	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
<hr/>				
2.39	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Twin River Veterinary Service</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.42</u> <input type="checkbox"/> G _____
<hr/>				
2.40	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Hoofstock Genetics</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.24</u> <input type="checkbox"/> G _____
<hr/>				
2.41	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Jerry &amp; Dorothy Jorgensen</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.28</u> <input type="checkbox"/> G _____
<hr/>				
2.42	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Webberville Feed &amp; Grain Co.</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.43</u> <input type="checkbox"/> G _____
<hr/>				
2.43	<b>Jerry Irving Jorgensen</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>The Dart Bank</b>	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.41</u> <input type="checkbox"/> G _____
<hr/>				

**Fill in this information to identify the case:**Debtor name RI-VAL-RE GENETICS, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGANCase number (if known) 21-00961☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:

From 1/01/2021 to Filing Date

Sources of revenue  
Check all that apply

☐ Operating a business

\$581129.48 Auction  
proceeds to secured  
creditor

☒ Other

Gross revenue  
(before deductions and  
exclusions)

\$1.00

For prior year:

From 1/01/2020 to 12/31/2020

☐ Operating a business

Sales of cattle &  
other products - see  
deposits on Dart  
Bank check register

☒ Other\$1.00

For year before that:

From 1/01/2019 to 12/31/2019

☒ Operating a business

per sole member's  
IRS Schedule F

☒ Other\$2,533,554.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.

Description of sources of revenue

Gross revenue from  
each source  
(before deductions and  
exclusions)

From the beginning of the fiscal year to filing date:

From 1/01/2021 to Filing Date

do not believe any assets  
remain to liquidate

\$0.00

For prior year:

From 1/01/2020 to 12/31/2020

possible rental income per  
prior year tax return

Unknown

Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961**

For year before that:  
From **1/01/2019** to **12/31/2019**

**Description of sources of revenue**

**Gross revenue from each source**  
(before deductions and exclusions)

**Rental income per sole member's IRS Schedule F other income**

**\$10,185.00****Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <b>The Dart Bank Kassie Rhoades 368 South Park Street P.O. Box 40 Mason, MI 48854</b>	<b>1/15/21 \$153766.83 2/08/21 \$177985.45 2/12/21 \$13697.00 3/15/21 \$235633.97 4/01/21 \$46.23</b>	<b>\$581,129.48</b>	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u><b>Auction proceeds</b></u>
3.2. <b>The Dart Bank Kassie Rhoades 368 South Park Street P.O. Box 40 Mason, MI 48854</b>	<b>April 2021 - satisfied in full</b>	<b>\$98,010.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u><b>Payroll Protection Program Loan Forgiveness Claim - proceeds to Lender PPP Loan #301036 SBA PPP #62556470-08</b></u>

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
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Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961**

Creditor's name and address	Describe of the Property	Date	Value of property
Aaron & Robin Jorgensen 4104 Moyer Road Williamston, MI 48895	NOTICE TO QUIT issued by Aaron & Robin Jorgensen pursuant to MCL 554.134(1) or (3) to Ri-Val-Re Genetics LLC to Recover Possession of real property located on the north and south side of Moyer Road and used by RI-VAL RE GENETICS, LLC for farming and dairy operation by 12/15/2020	11/11/20	Unknown

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Andrew Beckel & Dagmer Beckel dba Golden Calf Company LLC v. Jerry Jorgensen and RI-VAL-RE Genetics, LLC 20 SC 552	Collection - Small Claims Judgment w Civil Bench Warrant	Chippewa County Circuit Court Clerk of the Court 711 N Bridge Street Chippewa Falls, WI 54729	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Animart, LLC v. RI-VAL-RE Genetics, LLC & Jeremiah (sic) I. Jorgensen 2020SC001460	Collection -Small Claims 1/22/2021 Judgment Amended	Small Claims Court Clerk of the Court - Small Claims Dodge County Justice Facility 210 W. Center Street Juneau, WI 53039-1091	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.3.	Caledonia Farmers Elevator v. Ri-Val-Re Genetics, LLC 19-000600-CB	12/19/19 Default Judgment; Post judgment collection activity	Ingham County Circuit Court Clerk of the Court 313 W. Kalamazoo Street Lansing, MI 48933	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.4.	Driven Embryo Services, LLC v. Jerry Jorgensen and Ri-Val-Re Genetics, LLC 01961 LACV026673	Default Judgment hearing 1/26/21	Winneshiek County Clerk District Court 201 W Main Decorah, IA 52101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.5.	<b>GENSTART, LLC v. RI-VAL-RE GENETICS, LLC &amp; Jerry Jorgensen 20-000263-CK</b>	<b>05/08/2020 Affidavit &amp; Notice of Entry of Foreign Judgment - Trempealeau County, Wisconsin #20CV21; post judgment collection hearing 4/13/21</b>	<b>Ingham County Circuit Court Clerk of the Court 313 W. Kalamazoo Street Lansing, MI 48933</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.6.	<b>Larson Acres, Inc. b. Jerry Jorgensen &amp; RI-VAL-RE Genetics, LLC &amp; Jerry Jorgensen 20-000430-CK</b>	<b>Affidavit &amp; Notice of Entry of 6/5/20 Foreign Judgment - Rock County, Wisconsin #20CV217</b>	<b>Ingham County Circuit Court Clerk of the Court 313 W. Kalamazoo Street Lansing, MI 48933</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.7.	<b>Larsen Acres, Inc. v. RI-VAL-RE Genetics, LLC &amp; Jerry Jorgensen 2020CV000217</b>	<b>Collection -6/5/20 Judgment</b>	<b>Clerk of the Circuit Court Rock County Courthouse 51 S. Main Street Janesville, WI 53545</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.8.	<b>The Dart Bank v. Jerry Irving Jorgensen, RI-VAL-RE GENETICS LLC, and Andrea Lee Jorgensen 20-000580-CB-C30</b>	<b>Collection P Notes, Guaranty, Claim &amp; Delivery, Judicial Foreclosure Mtn Summary Disposition pending; PT 8/12/21 Trial 9/7/21</b>	<b>Ingham County Circuit Court Clerk of the Court 313 W. Kalamazoo Street Lansing, MI 48933</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None



Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961****Description of the property lost and how the loss occurred****Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

**Dates of loss****Value of property lost****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.**Who was paid or who received the transfer?**  
**Address****If not money, describe any property transferred****Dates****Total amount or value**11.1. **Wardrop & Wardrop, P.C.**  
**300 Ottawa Avenue, N.W.**  
**Suite 150**  
**Grand Rapids, MI 49503-2308****Attorney Fees & Costs (Filing Fee)****04/12/21****\$3,000.00****Email or website address**  
**bkfilings@wardroplaw.com****Who made the payment, if not debtor?**  
**Aaron Jorgensen****12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.**Name of trust or device****Describe any property transferred****Dates transfers were made****Total amount or value****13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.**Who received transfer?**  
**Address****Description of property transferred or payments received or debts paid in exchange**  
**RI-VAL-RE Genetics, LLC 12/15/2020**  
**auction of Farm Equipment including**  
**encumbered (Consignor): 2018 Kuhn**  
**Knight VT Mixer; 2015 John Deere 6150M**  
**Tractor; 1983 John Deere Tractor**  
**RW4850P003115 and Mensch Angled**  
**Scraper SN 37963; net proceeds to**  
**AgDirect****Date transfer was made****Total amount or value**

13.1

**Bidders at Meidema Auction****01/07/2021****\$82,739.82****Relationship to debtor**  
**none known**

Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961**

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.2	<b>Bidders at Meidema Auction</b>	<b>See Miedema's Orbit Bid Auction Report for RI-VAL-RE Genetics, LLC held 12/15/2020; net proceeds to Dart Bank</b>	<b>01/08/2021</b>	<b>\$571,486.17</b>
	<b>Relationship to debtor none known</b>			
13.3	<b>Unknown c/o Consignor/Agent PO Box 42 Cass City, MI 48726</b>	<b>Dairy Cows sold through Agent: Kreeger and Associates, LLC - report provided to Chapter 7 Trustee</b>	<b>various 2020</b>	<b>\$1.00</b>
	<b>Relationship to debtor none known</b>			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address

Dates of occupancy  
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services  
the debtor providesIf debtor provides meals  
and housing, number of  
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☒ No. Go to Part 10.☐ Yes. Does the debtor serve as plan administrator?**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. <b>The Dart Bank Kassie Rhoades 368 South Park Street P.O. Box 40 Mason, MI 48854</b>	<b>XXXX-4640</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	<b>current statement overdrawn -\$116.19 since 10/2020 chageoff</b>	<b>\$0.00</b>

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
<b>Aaron Jorgensen 4104 Moyer Road Williamston, MI 48895</b>	<b>4765 Moyer Road Webberville, MI 48892</b>	<b>Debtor operated on farm owned by sole member's parents - outbuildings/barns may contain property and equipment for farming operations never owned by Debtor. Debtor's machinery/equipment/supplies, et al moved to Bell Oak Road for Dcember 2020 Auction.</b>	<b>Unknown</b>

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the

Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961**

medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
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**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To  annual income tax preparation
26a.1. <b>James R. Roberts Roberts Boehler &amp; Fisher PC 3110 Fashion Square Blvd. Saginaw, MI 48603</b>	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961**☐ None**Name and address****If any books of account and records are unavailable, explain why**

26c.1. **Jerry Irving Jorgensen**  
**4765 Moyer Road**  
**Webberville, MI 48892**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None**Name and address**

26d.1. **The Dart Bank**  
**Kassie Rhoades**  
**368 South Park Street**  
**P.O. Box 40**  
**Mason, MI 48854**

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No☒ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**27.1 **Jerry Jorgensen****Fall 2020****see Auctioneer Report****Name and address of the person who has possession of inventory records****Miedema Auctioneers**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

**Name****Address****Position and nature of any interest****% of interest, if any****Jerry Irving Jorgensen****4765 Moyer Road**  
**Webberville, MI 48892****Member Manager****100**

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☒ Yes. Identify below.**Name and address of recipient****Amount of money or description and value of property****Dates****Reason for providing the value**

Debtor **RI-VAL-RE GENETICS, LLC**Case number (if known) **21-00961**

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Jerry Irving Jorgensen 4765 Moyer Road Webberville, MI 48892	unknown reconciling Dart Bank check register	2020	possible expense reimbursement, no wages
	Relationship to debtor sole member			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

Debtor RI-VAL-RE GENETICS, LLCCase number (if known) 21-00961**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on April 26, 2021

/s/ Jerry Irving Jorgensen

Signature of individual signing on behalf of the debtor

Jerry Irving Jorgensen

Printed name

Position or relationship to debtor Sole Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

08/17

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF MICHIGAN**

In re:

Case No. 21-00961**RI-VAL-RE GENETICS, LLC**

Tax ID: 47-4436777

Chapter 7 filed 04/12/2021

Debtor.

\_\_\_\_\_/

**ASSET PROTECTION REPORT**

Pursuant to Local Bankruptcy Rule 1007-2(d), debtors filing a Chapter 7 petition and debtors in a case converting to Chapter 7 must file an Asset Protection Report. List below any property referenced on **Schedule D** (Creditors Holding Secured Claims); or **Schedule G** (Executory Contracts and Unexpired Leases); and **any insurable asset in which there is nonexempt equity**. For each asset listed, provide the following information regarding property damage or casualty insurance:

<b>INSURABLE ASSET</b> (from schedules)	<b>IS ASSET INSURED?</b> (Yes/No)	<b>NAME &amp; ADDRESS OF AGENT OR INSURANCE CO.</b>	<b>POLICY EXPIRATION DATE</b> (MM/YYYY)	<b>WILL DEBTOR RENEW INSURANCE ON EXPIRATION?</b> (Yes/No)
<b>-NONE-</b>	N/A	N/A	N/A	N/A

If the debtor is self-employed, does the debtor have general liability insurance for business activities?

Yes ☐ No ☐

I declare, under penalty of perjury, that the above information is true and accurate to the best of my knowledge. I intend to provide insurance protection for any exemptible interests in real or personal property of the estate, and I request that the trustee not expend estate funds to procure insurance coverage for my exemptible assets.

Dated: 04/25/21/s/Jerry Irving Jorgensen

by: **Jerry Irving Jorgensen**  
Sole Member of **RI-VAL-RI GENETICS, LLC**  
Debtor

Pursuant to LBR 1007-2(f), debtor is required to provide the trustee with a copy of the Declarations Page for any insurance policy covering an insurable asset at least 7 days before the date first set for the meeting of creditors.